



MONITORING FORM

We ask you to complete this form in order to continue to demonstrate our commitment to equality and diversity. The forms are anonymous and you are under no obligation to complete one but we are grateful if you do. The information plays no part in selection process.

Position applied for:

Date:

Are you? (Tick as appropriate) Female ☐ Male ☐ Trans ☐ Non-binary ☐ Intersex ☐ Other ☐
Prefer Not to Say ☐

Are you? (Tick as appropriate) Heterosexual ☐ Lesbian ☐ Gay ☐ Bisexual ☐ Queer ☐ Prefer Not to Say ☐

Which one of the following age groups are you in?

Under 25 ☐
25 – 35 ☐
36 – 45 ☐
46 – 55 ☐
56 – 65 ☐
Over 65 ☐
Prefer Not to Say ☐

Which of the following ethnic backgrounds do you consider yourself to belong to?

Ethnic origin is not about nationality, place of birth or citizenship. It is about the group to which you perceive you belong. The ethnic groups are standard categories for collecting ethnic group information in line with the guidance from the Office for National Statistics and the Equality and Human Rights Commission. The list of groups is designed to allow most people to identify themselves. The list is not intended to leave out any groups of people but to keep the collection of ethnic information simple.

Please chose one section by ticking a box against it and also where applicable tick the appropriate box

White ☐

English ☐ Welsh ☐ Scottish ☐ Northern Irish ☐ Irish ☐
British ☐ Gypsy / Irish Traveller ☐ Prefer not to say ☐

Any other white background, please write in:

Mixed/multiple ethnic groups ☐

White and Black Caribbean ☐ White and Black African ☐ White and Asian ☐ Prefer not to say ☐ Any other mixed background, please write in:

Asian/Asian British ☐

Indian ☐ Pakistani ☐ Bangladeshi ☐ Chinese ☐ Prefer not to say ☐

Any other Asian background, please write in:

Black/ African/ Caribbean/ Black British ☐

African ☐ Caribbean ☐ Prefer not to say ☐

Any other Black/African/Caribbean background, please write in:

Other ethnic group ☐

Arab ☐ Prefer not to say ☐ Any other ethnic group, please write in:

Where other ticked, please write in:

Prefer Not to Say ☐

Disability

Many people who do not consider themselves to be disabled may be covered by the Equalities Act 2010 because they have a health condition that has an impact on their lives.

What do we mean when we say disability

Disability is a physical or mental impairment, which has a substantial and long-term adverse effect on a person's ability to carry out normal day-to-day activities.

Do you have a physical or mental impairment or long term health condition?

Is this expected to last, or has it lasted, for a year or longer?

Does this make it difficult for you to do the things that most people do on a fairly regular and frequent basis?

For a comprehensive definition of disability including examples please refer to <https://www.gov.uk/definition-of-disability-under-equality-act-2010>

Do you consider that you are disabled as defined by the Equalities Act 2010?

Yes ☐

No ☐

Prefer Not to Say ☐

What is your religion or belief? We understand that below is a list of religions commonly found in Britain. They are in alphabetical order and not intended to signify rank in terms of importance. We realise that the list is not exhaustive and if your religion is not specifically listed we ask that you do not take offence as none was intended.

Buddhist ☐ Church of England ☐ Hindu ☐ Jewish ☐ Muslim ☐ No religion or belief ☐ Other ☐ Roman Catholic ☐ Sikh ☐ Prefer not to say ☐

If other religion or belief, please write in:

What is your current working pattern?

Full-time ☐ Part-time ☐ Prefer not to say ☐

What is your flexible working arrangement?

None ☐ Flexi-time ☐ Staggered hours ☐ Term-time hours ☐
Annualised hours ☐ Job-share ☐ Flexible shifts ☐ Compressed hours ☐
Homeworking ☐ Prefer not to say ☐ If other, please write in:

Do you have caring responsibilities? If yes, please tick all that apply

None ☐ Primary carer of a child/children (under 18) ☐
Primary carer of disabled child/children ☐
Primary carer of disabled adult (18 and over) ☐ Primary carer of older person ☐
Secondary carer (another person carries out the main caring role) ☐
Prefer not to say ☐

Where did you see this post advertised/how did you learn of this position?

Thank you for your help in completing this form. Please send it with your completed application form to recruitment@uklgig.org.uk.

Privacy Notice: Your privacy and data protection

In order to recruit and manage staff, UKLGIG needs to store personal information (data) about all applicants. UKLGIG is registered as a “controller of personal data” with under the Data Protection Act 2018 with the Information Commissioner. By filling in this form you accept that we will keep the information on this form. UKLGIG keeps all personal information safely and securely, and does not share your information with anyone outside UKLGIG or any other organisation without your consent. Information is kept for the minimum period necessary which for this form is 6 months after the conclusion of the recruitment campaign.

You have a right to request access to the information that we hold about you and you have other rights to protect your information. More details are available from any member of UKLGIG staff.